STATEMENT OF

FORM 1	ORGANIZ (See instruc			Office use only
1. NAME OF COMMITTEE (in	(Check if name is changed)	Example: If typying, typover the lines	ne 12FE4M5	
Takeda Pharm	aceuticals America, Inc. Politi	cal Action Committee (1	akPA- 	
ADDRESS (number and	one Takeda Parkv	vay 		
(Check if address is changed)				
	Deerfield			60015 -
		CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MA	L ADDRESS (Please provide only one	e-mail address)		
(Check if address is changed)	awilkinson@tpna.	com 		
COMMITTEE'S WEB (Check if address is changed)	PAGE ADDRESS (URL)			
2. DATE 0.3				
3. FEC IDENTIFICA	TION NUMBER	C C00441733		
4. IS THIS STATEM	IENT NEW (N) OR	X AMENDED	(A)	
I certify that I have exami	ned this Statement and to the best of my	knowledge and belief it is true, co	rrect and complete	
Type or Print Name of	Treasurer Helen Evans			
Signature of Treasurer	Electronically Filed by Helen E	vans	_ Date 03	26 / 2009
NOTE: Submission of fa	Ise, erroneous, or incomplete information	may subject the person signing the	•	-
Office Use Only		For further inform Federal Election C Toll Free 800-424-	ommission 9530	FEC FORM 1 (Revised 02/2009)